

Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 MAR 23 PM 1:15

File with: City or Town Clerk or Election Commission
 Fill in Reporting Period dates: Beginning Date: 1/1/2015 Ending Date: 3/20/2015

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution
VIRAPHANH DOOANGMANI

Candidate Full Name (if applicable)

AMHERST SCHOOL COMMITTEE

Office Sought and District

12 LONGMEADOW DR. UNIT 21, AMHERST, MA

Residential Address

Telephone Number (optional): 413-461-6386COMMITTEE TO ELECT VIRA DOOANGMANI

Committee Name

RENE THEBERGE

Name of Committee Treasurer

12 LONGMEADOW DR. UNIT 21, AMHERST, MA

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0.00

Line 2: Total receipts this period (page 3, line 11)

2041.00

Line 3: Subtotal (line 1 plus line 2)

2041.00

Line 4: Total expenditures this period (page 5, line 14)

1014.60

Line 5: Ending Balance (line 3 minus line 4)

1126.40

Line 6: Total in-kind contributions this period (page 6)

0.00

Line 7: Total (all) outstanding liabilities (page 7)

0.00Line 8: Name of bank(s) used: NORTHAMPTON COOPERATIVE BANK

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date: 3/22/2015

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date: 3/22/2015

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/16/15	ANDREA BATTLE AMHERST 40 VALLEY VIEW DRIVE MA	100.00	
3/18/15	MARI CASTANEDA 147 LOGTOWN ROAD AMHERST, MA 01002	50.00	
3/02/15	VIRA DOUGLAS MARY 12 LONG MEADOW DR. UNIT 21 AMHERST, MA 01002	100.00	
3/03/15	RICK LAST 590 MIDDLE ST. AMHERST, MA 01002	50.00	
3/20/15	DEBORAH LEVINSON 14 HAWLEY ROAD HAWLEY, MA 01035	50.00	
3/20/15	HIND MARI 20 COLUMBIA DR. AMHERST, MA 01002	50.00	
3/11/15	CAROLINE MURRAY 15 AMITY PLACE AMHERST, MA 01002	75.00	
2/05/15	OPAT OMIMBAKU 28 TAMARACK DR. AMHERST, MA 01002	100.00	
3/03/15	MARY SANTIAGO 11 NUTTING AVE AMHERST, MA 01002	50.00	PROFESSORS, UMASS, AMHERST
3/03/15	DEMETRIA AMILCAR SNABBAZ 29 CHAPEL RD, AMHERST, MA	300.00	PROFESSORS, UMASS, AMHERST
3/11/15	JEAN SHERLOCK 298 DANIEL SHAYS HIGHWAY PELHAM, MA 01002	50.00	
3/20/15	DADE SINGAPURI 142 HIGH ST AMHERST, MA 01002	100.00	
Line 9: Total Receipts over \$50 (or listed above)			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

152500

Line 10: Total Receipts \$50 and under* (not listed above)

616,00

Line 11: TOTAL RECEIPTS IN THE PERIOD

21 41.00

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/10/15	DAILY HAMPSHIRE GAZETTE	115 CONZ ST. NORTHAMPTON, MA	NEWSPAPER AD	723.38
3/02/15	MOM'S HOUSE MARKET	318 COLLEGE ST. AMHERST, MA	FOOD FOR FUNDRAISER	101.22
3/02/15	PIZZA HOUSE OF AMHERST	17 MONTAGU RD AMHERST, MA	FOOD FOR FUNDRAISER	90.00
3/2/15	AMHERST VFW POST 754	2157 MAIN ST AMHERST, MA	HALL RENTAL FOR FUNDRAISER	100.00
Line 12: Total Expenditures over \$50 (or listed above)				1914.60
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1914.60

Enter on page 1, line 4 →

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

[illegible]

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			Line 15: In-Kind Contributions over \$50 (or listed above)	6
			Line 16: In-Kind Contributions \$50 & under (not listed above)	0
Enter on page 1, line 6 →			Line 17: TOTAL IN-KIND CONTRIBUTIONS	6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	

